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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P37821

1. Corporation Name
THE SOCIETY OF ENVIRONMENTAL TOXICOLOGY AND CHEMISTRY INCORPORATED

Principal Place of Business: 1010 N. 12TH AVE. PENSACOLA FL 32501
 Mailing Address: 1010 N. 12TH AVE. PENSACOLA FL 32501



21	2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
	Suite, Apt. #, etc.	Suite, Apt. #, etc.	03/09/1992
22	City & State	City & State	4. FEI Number
	Zip	Country	52-1184315
23	Country	Country	Applied For
			Not Applicable
24	25	29	30

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
PARRISH, RODNEY 1010 NORTH 12TH AVE. PENSACOLA FL 32501-3307		81 Name	85 Zip Code
		82 Street Address (P.O. Box Number is Not Acceptable)	FL
		83	
		84 City	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D RODGERS, JOHN	1.1 TITLE	VP
NAME	1 TWET DRIVE	1.2 NAME	Rodgers, John
STREET ADDRESS	PENDLETON SC 29670	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	PP WOLTERING, DANIEL M	2.1 TITLE	
NAME	4350 NORTH FAIRFAX DRIVE	2.2 NAME	
STREET ADDRESS	ARLINGTON VA	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	ST VERSTEEG, DONALD J	3.1 TITLE	ST
NAME	5299 SPRING GROVE AVENUE	3.2 NAME	Wentsel, Randall S.
STREET ADDRESS	CINCINNATI OH 45217	3.3 STREET ADDRESS	401 M Street, SW (MC 8623D)
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Washington, DC 20460
TITLE	VP DORWARD-KING, ELAINE	4.1 TITLE	P
NAME	8315 WEST 3595 S	4.2 NAME	Dorward-King, Elaine
STREET ADDRESS	MAGNA UT	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	P MAYER, FOSTER L	5.1 TITLE	PP
NAME	ONE SABINE ISLAND DR	5.2 NAME	Mayer, Foster L.
STREET ADDRESS	GULF BREEZE FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	ED PARRISH, RODNEY	6.1 TITLE	
NAME	1010 NORTH 12TH AVENUE	6.2 NAME	
STREET ADDRESS	PENSACOLA FL 32501	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in

CR2E037 (1/98)